

REDACTED EXHIBIT A
Case # No. 2:22-CR-00213-KJM
TINU KHANNA Defendant (2)

Your Cases

I-765 Application for Employment Authorization

Submitted on November 8, 2022

Receipt # I [REDACTED]

[View PDF](#) ▾

Sections

Case status



November 8, 2022

Case Is Being Actively Reviewed By USCIS

As of November 8, 2022, we are actively reviewing your Form I-765, Application for Employment Authorization, Receipt Number I [REDACTED]. Our records show nothing is outstanding at this time. We will let you know if we need anything from you. If you move, go to www.uscis.gov/addresschange to give us your new mailing address.

Current as of today at 11:32 a.m.

 [Concurrent filing](#)



Application For Employment Authorization

Department of Homeland Security
U.S. Citizenship and Immigration Services

USCIS
Form I-765

OMB No. 1615-0040
Expires 10/31/2025

For USCIS Use Only	<input type="checkbox"/> Authorization/Extension Valid From <hr/>	Fee Stamp		Action Block
	<input type="checkbox"/> Authorization/Extension Valid Through <hr/>			
	Alien Registration Number A- <input type="text"/>			
	Remarks			

To be completed by an attorney or Board of Immigration Appeals (BIA)- accredited representative (if any).	<input type="checkbox"/> Select this box if Form G-28 is attached	Attorney or Accredited Representative USCIS Online Account Number (if any) <input type="text"/>
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► START HERE - Type or print in black ink.

Part 1. Reason for Applying

I am applying for (select only one box):

1.a. Initial permission to accept employment.

1.b. Replacement of lost, stolen, or damaged employment authorization document, or correction of my employment authorization document **NOT DUE** to U.S. Citizenship and Immigration Services (USCIS) error.

NOTE: Replacement (correction) of an employment authorization document due to USCIS error does not require a new Form I-765 and filing fee. Refer to **Replacement for Card Error** in the **What is the Filing Fee** section of the Form I-765 Instructions for further details.

1.c. Renewal of my permission to accept employment. (Attach a copy of your previous employment authorization document.)

Other Names Used

Provide all other names you have ever used, including aliases, maiden name, and nicknames. If you need extra space to complete this section, use the space provided in Part 6.

Additional Information

2.a. Family Name (Last Name)	<input type="text"/>
2.b. Given Name (First Name)	<input type="text"/>
2.c. Middle Name	<input type="text"/>
3.a. Family Name (Last Name)	<input type="text"/>
3.b. Given Name (First Name)	<input type="text"/>
3.c. Middle Name	<input type="text"/>

Part 2. Information About You

Your Full Legal Name

1.a. Family Name (Last Name)	<input type="text" value="Khanna"/>
1.b. Given Name (First Name)	<input type="text" value="tinu"/>
1.c. Middle Name	<input type="text"/>

4.a. Family Name (Last Name)	<input type="text"/>
4.b. Given Name (First Name)	<input type="text"/>
4.c. Middle Name	<input type="text"/>

Part 2. Information About You (continued)

Your U.S. Mailing Address

5.a. In Care Of Name (if any)

tinu Khanna

5.b. Street Number and Name

5.c. Apt. Ste. Flr.

5.d. City or Town

5.e. State 5.f. Zip Code

6. Is your current mailing address the same as your physical address?

Yes No

NOTE: If you answered "No" to Item Number 6., provide your physical address below.

U.S. Physical Address

7.a. Street Number and Name

7.b. Apt. Ste. Flr.

7.c. City or Town

7.d. State 7.e. Zip

Other Information

8. Alien Registration Number

y)

► A- 2

9. USCIS Online Account Nu

►

10. Gender

Female

11. Marital Status

Single Married Divorced Widowed

12. Have you previously filed Form I-765?

Yes No

13.a. Has the Social Security Administration (SSA) ever officially issued a Social Security card to you?

Yes No

NOTE: If you answered "No" to Item Number 13.a., skip to Item Number 14. If you answered "Yes" to Item Number 13.a., provide the information requested in Item Number 13.b.

13.b. Provide your Social Security number (SSN) (if known).

►

14. Do you want the SSA to issue you a Social Security card? (You must also answer "Yes" to Item Number 15., Consent for Disclosure, to receive a card.)

Yes No

NOTE: If you answered "No" to Item Number 14., skip to Part 2., Item Number 18.a. If you answered "Yes" to Item Number 14., you must also answer "Yes" to Item Number 15.

15. **Consent for Disclosure:** I authorize disclosure of information from this application to the SSA as required for the purpose of assigning me an SSN and issuing me a Social Security card.

Yes No

NOTE: If you answered "Yes" to Item Numbers 14. - 15., provide the information requested in Item Numbers 16.a. - 17.b.

Father's Name

Provide your father's birth name.

16.a. Family Name (Last Name)

16.b. Given Name (First Name)

Mother's Name

Provide your mother's birth name.

17.a. Family Name (Last Name)

17.b. Given Name (First Name)

Your Country or Countries of Citizenship or Nationality

List all countries where you are currently a citizen or national. If you need extra space to complete this item, use the space provided in Part 6. Additional Information

18.a. Country

India

18.b. Country

Part 2. Information About You (continued)

Place of Birth

List the city/town/village, state/province, and country where you were born.

19.a. City/Town/Village of Birth

[REDACTED]

19.b. State/Province of Birth

[REDACTED]

19.c. Country of Birth

India

20. Date of Birth (mm/dd/yyyy)

[REDACTED]

Information About Your Last Arrival in the United States

21.a. Form I-94 Arrival-Departure Record Number (if any)



21.b. Passport Number of Your Most Recently Issued Passport

[REDACTED]

21.c. Travel Document Number (if any)

[REDACTED]

21.d. Country That Issued Your Document

India

21.e. Expiration Date for Passport (mm/dd/yyyy)

ent

22. Date of Your Last Arrival Into the United States, On or About (mm/dd/yyyy)

tes, On or

23. Place of Your Last Arrival Into the United States

WASHINGTON, DC

24. Immigration Status at Your Last Arrival (for example, B-2 visitor, F-1 student, or no status)

B2 - Temporary Visitor For Pleasure.

25. Your Current Immigration Status or Category (for example, B-2 visitor, F-1 student, parolee, deferred action, or no status or category)

C33 - Child Of An Alien Classified As C3

26. Student and Exchange Visitor Information System (SEVIS) Number (if any)

► N-

Information About Your Eligibility Category

27. **Eligibility Category.** Refer to the **Who May File Form I-765** section of the Form I-765 Instructions to determine the appropriate eligibility category for this application. Enter the appropriate letter and number for your eligibility category below (for example, (a)(8), (c)(17)(iii)).

C33

28. **(c)(3)(C) STEM OPT Eligibility Category.** If you entered the eligibility category (c)(3)(C) in **Item Number 27.**, provide the information requested in **Item Numbers 28.a. - 28.c.**

28.a. Degree

[REDACTED]

28.b. Employer's Name as Listed in E-Verify

[REDACTED]

28.c. Employer's E-Verify Company Identification Number or a Valid E-Verify Client Company Identification Number

29. **(c)(26) Eligibility Category.** If you entered the eligibility category (c)(26) in **Item Number 27.**, provide the receipt number of your H-1B spouse's most recent Form I-797 Notice for Form I-129, Petition for a Nonimmigrant Worker.



30. **(c)(8) Eligibility Category.** If you entered the eligibility category (c)(8) in **Item Number 27.**, have you EVER been arrested for and/or convicted of any crime?

Yes No

NOTE: If you answered "Yes" to **Item Number 30.**, refer to **Special Filing Instructions for Those With Pending Asylum Applications (c)(8) in the Required Documentation** section of the Form I-765 Instructions for information about providing court dispositions.

31.a. **(c)(35) and (c)(36) Eligibility Category.** If you entered the eligibility category (c)(35) in **Item Number 27.**, please provide the receipt number of your Form I-797 Notice for Form I-140, Immigrant Petition for Alien Worker. If you entered the eligibility category (c)(36) in **Item Number 27.**, please provide the receipt number of your spouse's or parent's Form I-797 Notice for Form I-140.



31.b. If you entered the eligibility category (c)(35) or (c)(36) in **Item Number 27.**, have you EVER been arrested for and/or convicted of any crime? Yes No

NOTE: If you answered "Yes" to **Item Number 31.b.**, refer to **Employment-Based Nonimmigrant Categories, Items 8. - 9.,** in the **Who May File Form I-765** section of the Form I-765 Instructions for information about providing court dispositions.

Part 3. Applicant's Statement, Contact Information, Declaration, Certification, and Signature

NOTE: Read the **Penalties** section of the Form I-765 Instructions before completing this section. You must file Form I-765 while in the United States.

Applicant's Statement

NOTE: Select the box for either **Item Number 1.a.** or **1.b.** If applicable, select the box for **Item Number 2.**

1.a. I can read and understand English, and I have read and understand every question and instruction on this application and my answer to every question.

1.b. The interpreter named in **Part 4.** read to me every question and instruction on this application and my answer to every question in

a language in which I am fluent, and I understand everything.

2. At my request, the preparer named in **Part 5.**,

prepared this application for me based only upon information I provided or authorized.

Applicant's Contact Information

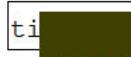
3. Applicant's Daytime Telephone Number

 95

4. Applicant's Mobile Telephone Number (if any)

 95

5. Applicant's Email Address (if any)

 tinu.khanna@uscis.gov

6. Select this box if you are a Salvadoran or Guatemalan national eligible for benefits under the ABC settlement agreement.

Applicant's Declaration and Certification

Copies of any documents I have submitted are exact photocopies of unaltered, original documents, and I understand that USCIS may require that I submit original documents to USCIS at a later date. Furthermore, I authorize the release of any information from any and all of my records that USCIS may need to determine my eligibility for the immigration benefit that I seek.

I furthermore authorize release of information contained in this application, in supporting documents, and in my USCIS records, to other entities and persons where necessary for the administration and enforcement of U.S. immigration law.

I understand that USCIS may require me to appear for an appointment to take my biometrics (fingerprints, photograph, and/or signature) and, at that time, if I am required to provide biometrics, I will be required to sign an oath reaffirming that:

- 1) I reviewed and understood all of the information contained in, and submitted with, my application; and
- 2) All of this information was complete, true, and correct at the time of filing.

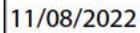
I certify, under penalty of perjury, that all of the information in my application and any document submitted with it were provided or authorized by me, that I reviewed and understand all of the information contained in, and submitted with, my application and that all of this information is complete, true, and correct.

Applicant's Signature

7.a. Applicant's Signature

 Tinu Khanna

7.b. Date of Signature (mm/dd/yyyy)

 11/08/2022

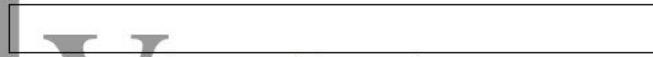
NOTE TO ALL APPLICANTS: If you do not completely fill out this application or fail to submit required documents listed in the Instructions, USCIS may deny your application.

Part 4. Interpreter's Contact Information, Certification, and Signature

Provide the following information about the interpreter.

Interpreter's Full Name

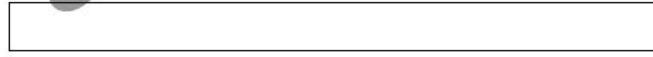
1.a. Interpreter's Family Name (Last Name)



1.b. Interpreter's Given Name (First Name)



2. Interpreter's Business or Organization Name (if any)



Part 4. Interpreter's Contact Information, Certification, and Signature

Interpreter's Mailing Address

3.a.	Street Number and Name				
3.b.	<input type="checkbox"/> Apt.	<input type="checkbox"/> Ste.	<input type="checkbox"/> Flr.		
3.c.	City or Town				
3.d.	State		3.e.	Zip Code	
3.f.	Province				
3.g.	Postal Code				
3.h.	Country				

Interpreter's Contact Information

4. Interpreter's Daytime Telephone Number

5. Interpreter's Mobile Telephone Number (if any)

6. Interpreter's Email Address (if any)

Interpreter's Certification

I certify, under penalty of perjury, that:

I am fluent in English and which is the same language specified in **Part 3., Item Number 1.b.**, and I have read to this applicant in the identified language every question and instruction on this application and his or her answer to every question. The applicant informed me that he or she understands every instruction, question, and answer on the application, including the **Applicant's Declaration and Certification**, and has verified the accuracy of every answer.

Interpreter's Signature

7.a. Interpreter's Signature (sign in ink)

7.b. Date of Signature (mm/dd/yyyy)

Part 5. Contact Information, Declaration, and Signature of the Person Preparing this Application, If Other Than the Applicant

Provide the following information about the preparer.

Preparer's Full Name

1.a. Preparer's Family Name (Last Name)

1.b. Preparer's Given Name (First Name)

2. Preparer's Business or Organization Name (if any)

Preparer's Mailing Address

3.a.	Street Number and Name				
3.b.	<input type="checkbox"/> Apt.	<input type="checkbox"/> Ste.	<input type="checkbox"/> Flr.		
3.c.	City or Town				
3.d.	State		3.e.	Zip Code	
3.f.	Province				
3.g.	Postal Code				
3.h.	Country				

Preparer's Contact Information

4. Preparer's Daytime Telephone Number

5. Preparer's Mobile Telephone Number (if any)

6. Preparer's Email Address (if any)

**Part 5. Contact Information, Declaration, and
Signature of the Person Preparing this
Application, If Other Than the Applicant**
(continued)

Preparer's Statement

7.a. I am not an attorney or accredited representative but have prepared this application on behalf of the applicant and with the applicant's consent.

7.b. I am an attorney or accredited representative and my representation of the applicant in this case extends does not extend beyond the preparation of this application.

NOTE: If you are an attorney or accredited representative, you may need to submit a completed Form G-28, Notice of Entry of Appearance as Attorney or Accredited Representative, with this application.

Preparer's Certification

By my signature, I certify, under penalty of perjury, that I prepared this application at the request of the applicant. The applicant then reviewed this completed application and informed me that he or she understands all of the information contained in, and submitted with, his or her application, including the **Applicant's Declaration and Certification**, and that all of this information is complete, true, and correct. I completed this application based only on information that the applicant provided to me or authorized me to obtain or use.

Preparer's Signature

8.a. Preparer's Signature (sign in ink)

8.b. Date of Signature (mm/dd/yyyy)

Electronic
Form

Only

Evidence Submitted

File Name	Document Category
tempImagexBmB2n.jpg	Other
tempImageKsHLWr.jpg	Unvalidated Photograph
tempImageSNvuky.jpg	Identity/Travel Documents
tempImageJDWaQi.jpg	Identity/Travel Documents
tempImageBeGEG1.jpg	Identity/Travel Documents
tempImageA0cjEv.jpg	Identity/Travel Documents
tempImageaeI3La.jpg	Other
tempImage32KKA7.jpg	Identity/Travel Documents
tempImageV0Wszt.jpg	Identity/Travel Documents

Electronic

Form

Only

8 Concurrent filing

I-821D Consideration of Deferred Action for Childhood Arrivals (DACA)

Submitted on November 8, 2022

Receipt # I [REDACTED]

[View PDF](#) ▾

Sections

Case status

November 8, 2022

Case Is Being Actively Reviewed By USCIS

As of November 8, 2022, we are actively reviewing your Form I-821D, Consideration of Deferred Action for Childhood Arrivals, Receipt Number I0 [REDACTED]. Our records show nothing is outstanding at this time. We will let you know if we need anything from you. If you move, go to www.uscis.gov/addresschange to give us your new mailing address.

Current as of today at 11:32 a.m.



**Consideration of Deferred Action
for Childhood Arrivals**
Department of Homeland Security
U.S. Citizenship and Immigration Services

USCIS
Form I-821D
OMB No. 1615-0124
Expires 10/31/2025

For USCIS Use Only	A- <input type="text"/>		Receipt	Action Block
	Case ID:			
	<input type="checkbox"/> Requestor interviewed on _____			
Returned: <u> / / </u>	Relocated	Received: <u> / / </u>	Remarks	
Resubmitted: <u> / / </u>		Sent: <u> / / </u>		
To Be Completed by an Attorney or Accredited Representative, if any.		<input type="checkbox"/> Select this box if Form G-28 is attached to represent the requestor.		Attorney State Bar Number (if any) <input type="text"/>

► **START HERE - Type or print in black ink. Read Form I-821D Instructions for information on how to complete this form.**

Part 1. Information About You (For Initial and Renewal Requests)

I am not in immigration detention.

I am in immigration detention.

I am requesting:

1. **Initial Request** - Consideration of Deferred Action for Childhood Arrivals

OR

2. **Renewal Request** - Consideration of Deferred Action for Childhood Arrivals

AND

For this Renewal request, my most recent period for Deferred Action for Childhood Arrivals expires on

(mm/dd/yyyy) ►

Full Legal Name

3.a. Family Name
(Last Name)

3.b. Given Name
(First Name)

3.c. Middle Name

U.S. Mailing Address (Enter the same address on Form I-765)

4.a. In Care of Name (if applicable)

4.b. Street Number and Name

4.c. Apt. Ste. Flr.

4.d. City or Town

4.e. State 4.f. ZIP Code

Removal Proceedings Information

5. Are you **NOW** or have you **EVER** been in removal proceedings, or do you have a removal order issued in any other context (for example, at the border or within the United States by an immigration agent)?

Yes No

NOTE: The term "removal proceedings" includes exclusion or deportation proceedings initiated before April 1, 1997; an Immigration and Nationality Act (INA) section 240 removal proceeding; expedited removal; reinstatement of a final order of exclusion, deportation, or removal; an INA section 217 removal after admission under the Visa Waiver Program; or removal as a criminal alien under INA section 238.

Part 1. Information About You (For Initial and Renewal Requests) (continued)

If you answered "Yes" to **Item Number 5.**, you must select a box below indicating your current status or outcome of your removal proceedings.

Status or outcome:

- 6.a. Currently in Proceedings (*Active*)
- 6.b. Currently in Proceedings (*Administratively Closed*)
- 6.c. Terminated
- 6.d. Subject to a Final Order
- 6.e. Other. Explain in **Part 8. Additional Information**
- 6.f. Most Recent Date of Proceedings
(*mm/dd/yyyy*) ►

- 6.g. Location of Proceedings

Other Information

- 7. Alien Registration Number (A-Number) (*if any*)
► A-

- 8. U.S. Social Security Number (*if any*)
►

- 9. Date of Birth (*mm/dd/yyyy*)

- 10. Gender Male Female

- 11.a. City/Town/Village of Birth

- 11.b. Country of Birth
India

- 12. Current Country of Residence
United States

- 13. Country of Citizenship or Nationality
India

- 14. Marital Status
 Married Widowed Single Divorced

Other Names Used (If Applicable)

If you need additional space, use **Part 8. Additional Information**.

- 15.a. Family Name (*Last Name*)
- 15.b. Given Name (*First Name*)
- 15.c. Middle Name

Processing Information

- 16. Ethnicity (*Select only one box*)
 Hispanic or Latino
 Not Hispanic or Latino
- 17. Race (*Select all applicable boxes*)
 White
 Asian
 Black or African American
 American Indian or Alaska Native
 Native Hawaiian or Other Pacific Islander
- 18. Height Feet 5 Inches
- 19. Weight Pounds
- 20. Eye Color (*Select only one box*)

<input type="checkbox"/> Black	<input type="checkbox"/> Blue	<input checked="" type="checkbox"/> Brown
<input type="checkbox"/> Gray	<input type="checkbox"/> Green	<input type="checkbox"/> Hazel
<input type="checkbox"/> Maroon	<input type="checkbox"/> Pink	<input type="checkbox"/> Unknown/Other
- 21. Hair Color (*Select only one box*)

<input type="checkbox"/> Bald (No hair)	<input checked="" type="checkbox"/> Black	<input type="checkbox"/> Blond
<input type="checkbox"/> Brown	<input type="checkbox"/> Gray	<input type="checkbox"/> Red
<input type="checkbox"/> Sandy	<input type="checkbox"/> White	<input type="checkbox"/> Unknown/Other

Part 2. Residence and Travel Information (For Initial and Renewal Requests)

- 1. I have been continuously residing in the U.S. since at least June 15, 2007, up to the present time.
 Yes No

Part 2. Residence and Travel Information (For Initial and Renewal Requests) (continued)

NOTE: If you departed the United States for some period of time before your 16th birthday and returned to the United States on or after your 16th birthday to begin your current period of continuous residence, and if this is an initial request, submit evidence that you established residence in the United States prior to 16 years of age as set forth in the instructions to this form.

For Initial Requests: List your current address and, to the best of your knowledge, the addresses where you resided since the date of your initial entry into the United States to present.

For Renewal Requests: List only the addresses where you resided since you submitted your last Form I-821D that was approved

If you require additional space, use **Part 8. Additional Information.**

Present Address

2.a. Dates at this residence (mm/dd/yyyy)

From ► [REDACTED] To ► Present

2.b. Street Number and Name

2.c. Apt. Ste. Flr.

2.d. City or Town

2.e. State [REDACTED]

Code [REDACTED]

Address 1

3.a. Dates at this

dd/yy

From ► [REDACTED] To ► [REDACTED]

3.b. Street Number [REDACTED] Dr

3.c. Apt. Ste. Flr.

3.d. City or Town [REDACTED]

3.e. State [REDACTED]

3.f. ZIP Code [REDACTED]

Address 2

4.a. Dates at this residence (mm/dd/yyyy)

From ► 08/01/2007 To ► 10/30/2018

4.b. Street Number [REDACTED]

4.c. Apt. Ste. Flr.

4.d. City or Town [REDACTED]

4.e. State [REDACTED]

4.f. ZIP Code [REDACTED]

Address 3

5.a. Dates at this residence (mm/dd/yyyy)

From ► [REDACTED] To ► [REDACTED]

5.b. Street Number [REDACTED]
and Name

5.c. Apt. Ste. Flr.

5.d. City or Town [REDACTED]

5.e. State [REDACTED]

5.f. ZIP Code [REDACTED]

Travel Information

For Initial Requests: List all of your absences from the United States since June 15, 2007.

For Renewal Requests: List only your absences from the United States since you submitted your last Form I-821D that was approved.

If you require additional space, use **Part 8. Additional Information.**

Departure 1

6.a. Departure Date (mm/dd/yyyy) ► [REDACTED]

6.b. Return Date (mm/dd/yyyy) ► [REDACTED]

6.c. Reason for Departure [REDACTED]

Departure 2

7.a. Departure Date (mm/dd/yyyy) ► [REDACTED]

7.b. Return Date (mm/dd/yyyy) ► [REDACTED]

7.c. Reason for Departure [REDACTED]

8. Have you left the United States without advance parole on or after August 15, 2012? Yes No

9.a. What country issued your last passport?

India

9.b. Passport Number [REDACTED]

9.c. Passport Expiration Date (mm/dd/yyyy) [REDACTED]

10. Border Crossing Card Number (if any) [REDACTED]

Part 3. For Initial Requests Only

1. I initially arrived and established residence in the U.S. prior to 16 years of age. Yes No

2. Date of **Initial** Entry into the United States (*on or about*)

(mm/dd/yyyy)



3. Place of **Initial** Entry into the United States

4. Immigration Status on June 15, 2012 (e.g. *No Lawful Status, Status Expired, Parole Expired*)

5.a. Were you **EVER** issued an Arrival-Departure Record (Form I-94, I-94W, or I-95)? Yes No

5.b. If you answered "Yes" to Item Number 5.a., provide your Form I-94, I-94W, or I-95 number (*if available*)



5.c. If you answered "Yes" to Item Number 5.a., provide the date your authorized stay expired, as shown on Form I-94, I-94W, or I-95 (*if available*).
(mm/dd/yyyy)

(mm/dd/yyyy)



Education Information

6. Indicate how you meet the education guideline (e.g., *Graduated from high school, Received a general educational development (GED) certificate or equivalent state-authorized exam, Currently in school*)

7. Name, City, and State of School Currently Attending or Where Education Received

8. Date of Graduation (e.g. *Receipt of Certificate of Completion, GED certificate, other equivalent state-authorized exam*) or, if currently in school, date of last attendance.
(mm/dd/yyyy)



Military Service Information

9. Were you a member of the U.S. Armed Forces or U.S. Coast Guard Yes No

If you answered "Yes:" to Item Number 9., you must provide responses to Item Numbers 9.a. - 9.d.

9.a. Military Branch

9.b. Service Start Date (mm/dd/yyyy) ►



9.c. Discharge Date (mm/dd/yyyy) ►



9.d. Type of Discharge

Part 4. Criminal, National Security, and Public Safety Information (For Initial and Renewal Requests)

If any of the following questions apply to you, use **Part 8. Additional Information** to describe the circumstances and include a full explanation.

1. Have you **EVER** been arrested for, charged with, or convicted of a felony or misdemeanor, *including incidents handled in juvenile court*, in the United States? *Do not include minor traffic violations unless they were alcohol- or drug related.* Yes No

If you answered "Yes," you must include a certified court disposition, arrest record, charging document, sentencing record, etc., for each arrest, unless disclosure is prohibited under state law.

2. Have you **EVER** been arrested for, charged with, or convicted of a crime in any country other than the United States? Yes No

If you answered "Yes," you must include a certified court disposition, arrest record, charging document, sentencing record, etc., for each arrest.

3. Have you **EVER** engaged in, do you continue to engage in, or plan to engage in terrorist activities? Yes No

4. Are you **NOW** or have you **EVER** been a member of a gang? Yes No

5. Have you **EVER** engaged in, ordered, incited, assisted, or otherwise participated in any of the following:

5.a. Acts involving torture, genocide, or human trafficking? Yes No

5.b. Killing any person? Yes No

5.c. Severely injuring any person? Yes No

5.d. Any kind of sexual contact or relations with any person who was being forced or threatened? Yes No

6. Have you **EVER** recruited, enlisted, conscripted, or used any person to serve in or help an armed force or group while such person was under age 15? Yes No

7. Have you **EVER** used any person under age 15 to take part in hostilities, or to help or provide services to people in combat? Yes No

Part 5. Statement, Certification, Signature, and Contact Information of the Requestor (For Initial and Renewal Requests)

NOTE: Select the box for either Item Number 1.a. or 1.b.

1.a. I can read and understand English, and have read and understand each and every question and instruction on this form, as well as my answer to each question.

1.b. The interpreter named in Part 6. has read to me each and every question and instruction on this form, as well as my answers to each question, in

a language in which I am fluent. I understand each and every question and instruction on this form as translated to me by my interpreter, and have provided true and correct responses in the language indicated above.

Requestor's Declaration and Certification

Copies of any documents I have submitted are exact photocopies of unaltered, original documents, and I understand that USCIS may require that I submit original documents to USCIS at a later date. Furthermore, I authorize the release of any information from any and all of my records that USCIS may need to determine my eligibility for the request that I seek.

I furthermore authorize release of information contained in this request, in supporting documents, and in my USCIS records, to other entities and persons where necessary for the administration and enforcement of U.S. immigration law.

I understand that USCIS may require me to appear for an appointment to take my biometrics (fingerprints, photograph, and/or signature) and, at that time, if I am required to provide biometrics, I will be required to sign an oath reaffirming that:

- 1) I reviewed and provided or authorized all of the information in my request;
- 2) I understood all of the information contained in, and submitted with, my request; and
- 3) All of this information was complete, true, and correct at the time of filing.

I certify, under penalty of perjury under the laws of the United States of America, that the foregoing is true and correct and that copies of documents submitted are exact photocopies of unaltered original documents. I understand that I may be required to submit original documents to U.S. Citizenship and Immigration Services (USCIS) at a later date. I also understand that knowingly and willfully providing materially false information on this form is a federal felony punishable by a fine, imprisonment up to 5 years, or both, under 18 U.S.C. section 1001. Furthermore, I authorize the release of any information from my records that USCIS may need to reach a determination on my deferred action request.

2.a. Requestor's Signature

→ Tinu Khanna

2.b. Date of Signature (mm/dd/yyyy) →

11/08/2022

Requestor's Contact Information

3. Requestor's Daytime Telephone Number

██████████

4. Requestor's Mobile Telephone Number

8██████████

5. Requestor's Email Address

██████████

Part 6. Contact Information, Certification, and Signature of the Interpreter (For Initial and Renewal Requests)

Interpreter's Full Name

Provide the following information concerning the interpreter.

1.a. Interpreter's Family Name (Last Name)

██████████

1.b. Interpreter's Given Name (First Name)

██████████

2. Interpreter's Business or Organization Name (if any)

██████████

Interpreter's Mailing Address

3.a. Street Number and Name

██████████

3.b. Apt. Ste. Flr. ██████████

3.c. City or Town

██████████

3.d. State

3.e. ZIP Code

██████████

3.f. Province

██████████

3.g. Postal Code

██████████

3.h. Country

██████████

Part 6. Contact Information, Certification, and Signature of the Interpreter (For Initial and Renewal Requests) (continued)

Interpreter's Contact Information

4. Interpreter's Daytime Telephone Number

5. Interpreter's Email Address

Interpreter's Certification

I certify that:

I am fluent in English and which is the same language provided in **Part 5., Item Number 1.b.;**

I have read to this requestor each and every question and instruction on this form, as well as the answer to each question, in the language provided in **Part 5., Item Number 1.b.;** and

The requestor has informed me that he or she understands each and every instruction and question on the form, as well as the answer to each question.

6.a. Interpreter's Signature

6.b. Date of Signature (mm/dd/yyyy) ►

Part 7. Contact Information, Declaration, and Signature of the Person Preparing this Request, If Other than the Requestor (For Initial and Renewal Requests)

Preparer's Full Name

Provide the following information concerning the preparer.

1.a. Preparer's Family Name (Last Name)

1.b. Preparer's Given Name (First Name)

2. Preparer's Business or Organization Name

Preparer's Mailing Address

3.a. Street Number
and Name

3.b. Apt. Ste. Flr.

3.c. City or Town

3.d. State

3.e. ZIP Code

3.f. Province

3.g. Postal Code

3.h. Country

Preparer's Contact Information

4. Preparer's Daytime Telephone Number

5. Preparer's Fax Number

6. Preparer's Email Address

Preparer's Declaration

I declare that I prepared this Form I-821D at the requestor's behest, and it is based on all the information of which I have knowledge.

7.a. Preparer's Signature

7.b. Date of Signature (mm/dd/yyyy) ►

NOTE: If you need extra space to complete any item within this request, see the next page for **Part 8. Additional Information**

Evidence Submitted

File Name	Document Category
[REDACTED]	Criminal History

Electronic
Form
Only



Additional Information

Department of Homeland Security

► A-

Have you ever been arrested for, charged with, or convicted of a felony or misdemeanor, including incidents handled in juvenile court, in the United States?:

In the United States District Court of Eastern District of California:

On November 02 2022, the two below allegations have been made and I (Tinu Khanna) was arrested on November 02 2022.

1. Conspiracy to Transport Stolen Property Interstate
2. Conspiracy to Commit Money Laundering

Electronic
Form
Only



Receipt Number [REDACTED]		Case Type I821D - CONSIDERATION OF DEFERRED ACTION FOR CHILDHOOD ARRIVALS
Received Date 11/08/2022	Priority Date	Requestor KHANNA, TINU
Notice Date 11/08/2022	Page 1 of 1	
KHANNA, TINU c/o TINU KHANNA [REDACTED]		Notice Type: Receipt Notice

We have received the application or petition ("your case") listed above. This notice only shows that your case was filed on the "Received Date" listed above. It does NOT grant you any immigration status or immigration benefit, and it is not evidence that your case is still pending. We will notify you in writing when we make a decision on your case or if we need additional information.

Please save this and any other notices about your case for your records. You should also keep copies of anything you send us, as well as proof of delivery. Have these records available when you contact us about your case.

If any of the above information is incorrect or you have any questions about the status of your case, please call the USCIS Contact Center (UCC) at 1-800-375-5283 (TDD number is 1-800-767-1833) or visit the USCIS website at www.uscis.gov. If you call us, please have your Alien Registration Number (A-Number) and/or the receipt number shown above. The receipt number is a tracking number for your case and will help with inquiries.

Processing time - Processing times vary by case type. Go to www.uscis.gov to see the current processing times listed by case type and office.

- View your case status on our website's Case Status Online page.
- You can also sign up to receive free email updates as we process your case.
- Most of the time your case is pending, the process status will not change. This is because we are working on cases that were filed before your case.
- When we make a decision on your case or if we need something from you, we will notify you by mail and update our systems.
- If you do not receive an initial decision or update from us within our current processing time, contact the UCC at 1-800-375-5283 or visit our website at www.uscis.gov.

If your address changes - Non-U.S. citizens must report a change of address within ten (10) days of moving within the United States or its territories. To file a change of address visit the USCIS website at www.uscis.gov/addresschange or call UCC at 1-800-375-5283 (TDD number is 1-800-767-1833).

Return of Original Documents - Use Form G-884, Request for the Return of Original Documents, to request the return of original documents submitted to establish eligibility for an immigration or citizenship benefit. You only need to submit one Form G-884 if you are requesting multiple documents contained in a single USCIS file. However, if the requested documentation is in more than one USCIS file, you must submit a separate request for each file. (For example: If you wish to obtain your mother's birth certificate and your parents' marriage certificate, both of which are in the USCIS file that pertains to her, submit one Form G-884 with your mother's information.)

NOTICE: Under the INA, the information you provide on and in support of applications and petitions is submitted under the penalty of perjury. USCIS and the U.S. Department of Homeland Security reserve the right to verify this information before and/or after making a decision on your case so we can ensure that you have complied with applicable laws, rules, regulations, and other legal authorities. We may review public information and records, contact others by mail, the internet or phone, conduct site inspections of businesses and residences, or use other methods of verification. We will use the information obtained to determine whether you are eligible for the benefit you seek. If we find any derogatory information, we will follow the law in determining whether to provide you (and the legal representative listed on your Form G-28, if you submitted one) an opportunity to address that information before we make a formal decision on your case or start proceedings.

Please see the additional information on the back. You will be notified separately about any other cases you filed.

USCIS encourages you to sign up for a USCIS online account. To learn more about creating an account and the benefits, go to <https://www.uscis.gov/file-online>.

Nebraska Service Center
U.S. CITIZENSHIP & IMMIGRATION SVC
P.O. Box 82521
Lincoln NE 68501-2521

USCIS Contact Center: www.uscis.gov/contactcenter

